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The Role of Integrated Health Post (Posyandu) Cadres in the Implementation of Stunting Prevention Programs in Bone Bolango Regency

Lusi Ahmad
Bina Mandiri University of Gorontalo,
Indonesia vinmike2497@gmail.com

Arifin Tahir
State University of Gorontalo, Indonesia

Sudarsono
Bina Mandiri University of Gorontalo,
Indonesia
sudarsono@y7mail.com

Merlan S. Uloli
Bina Mandiri University of Gorontalo,
Indonesia

Soeharto Puluhulawa
Bina Mandiri University of Gorontalo,
Indonesia

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Abstract

Stunting remains a serious problem in Indonesia, particularly in the eastern region, where the prevalence is relatively high compared to other regions. Bone Bolango Regency is one of the areas with high stunting rates, requiring strategic intervention, particularly through community-based programs. As the frontline of primary health care, Posyandu (Integrated Health Post) cadres play a central role in supporting stunting prevention and management efforts, from nutrition education and toddler growth monitoring to family support. However, the effectiveness of this role in supporting local government policies remains relatively limited. The purpose of this study was to analyze the role of Posyandu cadres in implementing stunting prevention programs in Bone Bolango Regency, while also identifying challenges and innovations that can strengthen their contributions. This research adopted a descriptive qualitative approach, employing in-depth interviews, observations, and documentation studies involving Posyandu cadres, health workers, and policymakers at the village and district levels. Initial findings indicate that cadre involvement extends beyond routine services to acting as agents of behavioral change through a participatory approach. This research is expected to provide scientific contributions related to strengthening the capacity of Posyandu cadres as the main pillar of community-based stunting prevention, as well as producing innovative recommendations for local governments to increase program effectiveness.

Keywords: Posyandu cadres; Stunting; Program Implementation; Prevention; Bone Bolango

Introduction

Stunting is a significant chronic nutritional problem in Indonesia, characterized by toddlers whose height is below the standard for their age due to long-term nutritional deficiencies. In Bone Bolango Regency, the stunting prevalence rate was recorded at 27.1% in 2023, then decreased to 23% in 2024, according to the Indonesian Nutritional Status Survey (SSGI) published in May 2025 (Kemenkes RI, 2025). This 4.1% decline is a positive initial achievement, but the figure is still far above the national average, which targets a prevalence below 14.2% by 2029. This condition indicates the need for more systematic and sustainable interventions to address the problem of stunting effectively. This phenomenon has significant long-term implications, as stunting not only affects children's growth and development, but also contributes to impaired cognitive development, reduced economic productivity, and the reduced potential of future generations (WHO, 2020). Emphasized that untreated stunting can reduce a child's learning capacity by up to 30% and work productivity as an adult by up to 20%. Therefore, prevention efforts are a top priority in the health development agenda at both the national and regional levels. The Indonesian government is implementing a National Strategy for Accelerating Stunting Prevention, which includes specific and sensitive nutrition interventions, one of which is through strengthening the function of Integrated Health Post (Posyandu) cadres. Posyandu cadres are at the forefront of health services in villages and sub-districts, responsible for monitoring child growth and development, providing nutrition education, and connecting communities with health services. The government also continues to optimize the role of Posyandu as community health service centers focused on monitoring toddler growth and development, providing nutrition counseling, and providing maternal and child health services (Sudiarti et al., 2019).

Recent research by(Najmi & Karwati, 2025) The study shows that Posyandu (Integrated Health Post) cadres serve a dual role as facilitators, communicators, and motivators in stunting prevention. They organize activities, provide nutritional information, and encourage community participation in routine checkups. Posyandu cadres, most of whom are community volunteers, are crucial actors in the delivery of these services. They serve not only as providers of health information but also as drivers of community behavior change in nutrition and parenting practices. However, significant challenges remain, such as limited cadre capacity, low public awareness, and cultural practices or myths that hinder the adoption of healthy behaviors (Sudarsono, 2015). These factors indicate the need for a more in-depth analysis of the effectiveness of cadre roles in the local context (Ludin et al., 2022).

Bone Bolango Regency, located in Gorontalo Province, is one of the districts that continues to face challenges in reducing stunting despite gradual improvements in prevalence. According to the Indonesian Nutritional Status Survey (SSGI), the stunting prevalence declined from 27.1% in 2023 to 23.0% in 2024. Although this trend indicates progress, the prevalence remains substantially higher than the national target, reflecting persistent disparities in maternal and child nutrition, access to primary healthcare, and community awareness. The district is characterized by a predominantly rural population, where geographical accessibility, socioeconomic conditions, and cultural practices continue to influence the utilization of maternal and child health services. Consequently, Bone Bolango provides an appropriate setting for examining how community-based health interventions can address persistent nutritional problems. Bone Bolango Regency has unique socio-cultural characteristics, with community participation heavily influenced by traditional norms and

community leaders. This situation can present both opportunities and obstacles in implementing stunting prevention programs. A descriptive qualitative research approach is deemed appropriate for exploring these dynamics, as it allows researchers to understand social realities from the perspective of cadres and the community (C. Creswell et al., 2021).

In Indonesia, Posyandu (Integrated Health Post) cadres are community health volunteers selected by local communities and appointed through village governments in collaboration with Community Health Centers (Puskesmas). Cadres are generally respected community members who demonstrate a commitment to voluntary public service, possess basic literacy skills, are willing to participate in regular training, and are able to communicate effectively with mothers and families in their communities. Rather than being formal government employees, they serve as trained community volunteers who receive technical guidance, supervision, and periodic capacity-building from health professionals, while operational support is commonly provided through village governments and local health programs. The primary responsibilities of Posyandu cadres include organizing monthly Posyandu services, registering mothers and children, measuring child growth and nutritional status, recording data in child health monitoring cards, providing nutrition and maternal health education, conducting home visits for high-risk families, encouraging community participation in preventive healthcare, and referring children with suspected nutritional problems to Community Health Centers. In addition, cadres facilitate communication between healthcare providers, village authorities, and community members, making them essential actors in implementing community-based stunting prevention programs. Their close relationship with local communities enables them to deliver culturally appropriate health promotion and strengthen community participation in maternal and child health initiatives. Several previous studies have focused on the effectiveness of stunting programs at a macro level, but few have specifically examined the role of Posyandu (Integrated Health Post) cadres in areas with unique characteristics like Bone Bolango. Bone Bolango Regency is one of the areas with a relatively high stunting rate compared to the national average. This situation underscores the need for more intensive and collaborative efforts, given that stunting impacts the quality of future generations, economic productivity, and the nation's future competitiveness (Pauweni et al., 2023).

In Bone Bolango, the implementation of the stunting prevention program relies heavily on the active role of Posyandu (Integrated Health Post) cadres. They conduct monthly weigh-ins, complete Health Cards (KMS), provide counseling, and facilitate supplementary feeding. However, despite their vital role, various obstacles often arise, such as limited training, low nutritional literacy, and a lack of supporting facilities (Ria Saputri Rejeki & Gerry Katon Mahendra, 2023). Recent trends indicate increased attention from local governments to the issue of stunting through integrated, cross-sectoral programs. However, challenges remain, including low levels of community participation, limited operational funds for cadres, and a lack of comprehensive program evaluation. Previous research by (A. K. Wardani et al., 2023) found that Posyandu (Integrated Health Post) cadres can make a positive contribution to stunting prevention through education and routine monitoring. However, the study also highlighted limitations in nutritional knowledge and reliance on community health center (Puskesmas) health workers. These findings are relevant to examining the potential for similar issues in Bone Bolango. In other areas, studies by (Mukhsin et al., 2023) Studies have shown that the success of stunting programs is significantly influenced by the intensity of cadre training, government support, and the involvement of community leaders. However, these

studies have not explored the local socio-cultural context that may influence community acceptance of nutrition messages.

Despite ample evidence of the importance of cadres, little research has specifically examined the implementation mechanisms of Posyandu cadres in Bone Bolango Regency, including how incentive structures, training, and intersectoral coordination work. However, local experiences, such as the prevention group in Dutohe village, demonstrate the potential for synergy between academics and Posyandu cadres to establish an anti-stunting forum (Abdulkadir et al., 2023).

Indonesia has strengthened its commitment to reducing stunting through the National Strategy for the Acceleration of Stunting Reduction, which emphasizes multisectoral collaboration, community empowerment, and the integration of nutrition-specific and nutrition-sensitive interventions. Within this framework, Posyandu cadres are recognized as key community-based actors responsible for growth monitoring, nutrition education, early detection of growth faltering, and facilitating access to primary healthcare services. These responsibilities position cadres as an essential component of Indonesia's strategy to improve maternal and child health outcomes. International evidence likewise demonstrates that community-based nutrition interventions delivered by trained community health volunteers significantly improve child growth monitoring, maternal nutrition knowledge, exclusive breastfeeding practices, complementary feeding, and early identification of children at nutritional risk. Such interventions are considered cost-effective and sustainable because they rely on community participation, local leadership, and culturally appropriate health promotion. From an innovation perspective, these approaches represent forms of social innovation that strengthen primary healthcare systems by integrating local knowledge, community engagement, and collaborative service delivery. Consequently, examining the role of Posyandu cadres contributes not only to the implementation of Indonesia's national stunting policy but also to the broader international literature on innovative community-based nutrition interventions that support the achievement of SDG 3 (Good Health and Well-being) and SDG 9 (Industry, Innovation and Infrastructure). A research gap that emerged was the lack of in-depth qualitative studies that holistically capture how Posyandu cadres in areas with a high stunting prevalence carry out their roles, the obstacles they face, and the strategies they use to overcome these challenges. Most research tends to be quantitative and focuses on the program's overall effectiveness, rather than on the social and operational dynamics on the ground. While some previous studies have focused on the effectiveness of stunting programs at a macro level, few have specifically addressed the role of Posyandu cadres in areas with unique characteristics like Bone Bolango (N. P. E. Wardani et al., 2023).

Although this study is situated in Bone Bolango Regency, Indonesia, its significance extends beyond the local context. Community health volunteers play a crucial role in strengthening primary healthcare systems in many low- and middle-income countries, particularly in improving maternal and child health, expanding access to preventive services, and supporting nutrition interventions. Despite their strategic contribution, evidence regarding how community health volunteers translate national stunting prevention policies into effective community-based practices remains limited, especially within diverse sociocultural settings. By examining the experiences of Posyandu cadres in Bone Bolango, this study contributes to the international discussion on community-based health systems, offering practical insights into how local health volunteers can strengthen primary healthcare, promote community participation, and support sustainable strategies for reducing childhood

stunting. These findings are expected to provide relevant evidence for researchers, policymakers, and public health practitioners facing similar challenges in other countries.

Thus, this study aims to conduct a comprehensive analysis of the role of Posyandu cadres in implementing the stunting prevention program in Bone Bolango Regency, including identifying various obstacles and factors that strengthen the effectiveness of this role. This study is expected to provide a real contribution both to the development of science and to efforts to improve public health programs at the local level. Benefits include: (1) for public health science, additional evidence of implementation based on narrative reviews; (2) for program actors, a reference for training models and incentive systems; and (3) for the policy field, a basis for more sustainable and locally sensitive strategies.

This study was guided by the following research questions: (1) What roles do Posyandu cadres perform in implementing stunting prevention programs in Bone Bolango Regency? (2) What challenges do Posyandu cadres encounter during program implementation? and (3) What strategies and innovations can strengthen the contribution of Posyandu cadres to community-based stunting prevention? These questions served as the foundation for data collection, analysis, and interpretation throughout the study.

Methods

This study employed a descriptive qualitative method, focusing on an in-depth description of the role of integrated health post (Posyandu) cadres in implementing the stunting prevention program in Bone Bolango Regency. The qualitative approach enabled researchers to understand the experiences, perspectives, and practices of cadres within their surrounding sociocultural context (J. W. Creswell, 2017). A descriptive design was chosen so that the data obtained could provide a factual picture of field phenomena, particularly regarding how Posyandu cadres carry out their roles as facilitators, communicators, and motivators in preventing stunting. This approach aligns with recommendations (Thompson Burdine et al., 2021), which emphasizes the importance of systematic description in qualitative research. The research location was determined in Bone Bolango Regency, Gorontalo Province, considering that this area has a fairly high prevalence rate of stunting and the role of Posyandu has become one of the main strategies in preventing it (Kementerian Kesehatan RI, 2022).

The research subjects consisted of Posyandu (Integrated Service Post) cadres, health workers such as midwives and community health center staff, and village government officials involved in implementing stunting prevention programs. Informants were selected using a purposive sampling technique, considering individuals with the most relevant information. The number of informants was not set rigidly from the outset, but rather followed the principle of data saturation, where data collection is stopped when the findings are repetitive and no new information is added. Data was collected through three stages: interviews, participant observation, and documentation. Interviews were conducted to explore the experiences and perspectives of Posyandu cadres regarding their role in the stunting prevention program. Meanwhile, participant observation was used to directly observe the implementation of services and activities at the Posyandu. A total of 20 participants were involved, consisting of 10 Posyandu cadres, 4 village midwives, 3

Community Health Center officers, and 3 village government officials. Documentation was used to supplement the data, including toddler growth records, activity reports, and regional policies related to stunting. Participants consisted of Posyandu cadres, village midwives, Community Health Center (Puskesmas) personnel, and village government officials directly involved in stunting prevention programs. Participants were selected using purposive sampling to ensure that only individuals with substantial experience and responsibilities related to the implementation of the program were included. Recruitment continued until data saturation was achieved, that is, when additional interviews no longer generated new themes or insights.

All data were analyzed qualitatively through data reduction, information presentation, conclusion drawing, and source triangulation to increase the validity of the results. Source triangulation was conducted by comparing information obtained from Posyandu cadres, health workers, and village government officials. Interview recordings were transcribed verbatim and analyzed using thematic analysis following Braun and Clarke's six-step framework. The analysis involved (1) familiarization with the data through repeated reading of the transcripts, (2) initial coding, (3) searching for potential themes, (4) reviewing and refining themes, (5) defining and naming themes, and (6) producing the final interpretation. Themes were developed inductively from participants' experiences and subsequently interpreted in relation to the study objectives and relevant literature. Method triangulation combined interviews, observation, and documentation to increase the validity of the research findings (Pias, 2025). To ensure the trustworthiness of the findings, the study adopted Lincoln and Guba's criteria of qualitative rigor. Credibility was enhanced through source and method triangulation involving interviews, observations, and document analysis. Dependability was strengthened by maintaining detailed documentation of the research procedures and analytical decisions. Confirmability was supported by comparing interpretations among the research team and maintaining an audit trail throughout the analysis. Transferability was addressed by providing a rich description of the research context, participant characteristics, and implementation setting, allowing readers to assess the applicability of the findings to similar contexts. The ethical aspects of the research were also a primary concern, given the involvement of community members and healthcare professionals as participants. Researchers are committed to obtaining informed consent from all informants, maintaining confidentiality, and using data solely for academic purposes. This approach aligns with applicable ethical standards in social and health research.

Results and Discussion

The analysis generated several major themes corresponding to the research questions, namely: (1) the strategic roles of Posyandu cadres in stunting prevention, (2) challenges encountered during program implementation, and (3) opportunities for strengthening innovation and sustainability in community-based health services. The findings indicate that Posyandu cadres in Bone Bolango Regency play a crucial role in supporting stunting prevention efforts, particularly through routine Posyandu activities that include weighing,

growth recording, and nutrition counseling. This finding is consistent with studies (Najmi & Karwati, 2025) which found cadres as the main facilitators of public health services.

The role of cadres as communicators is evident when they provide education on balanced nutrition to mothers of toddlers. This education is delivered persuasively, often using local languages to facilitate community understanding. This aligns with findings (Pratama et al., 2024) which emphasizes the effectiveness of persuasive communication of cadres in promoting a balanced nutritional menu. The main challenge faced by cadres is low public awareness of the importance of stunting prevention starting in the first 1,000 days of life (HPK). Many families remain bound by cultural practices and myths that hinder the implementation of parenting patterns and the provision of nutritious food (Astikasari, 2023).

The research results show that cadres serve as liaisons between professional healthcare workers, such as midwives and community health center staff, and the community. Cadres facilitate the dissemination of information on toddler growth and development monitoring results to midwives, allowing for prompt intervention if signs of stunting are detected. This reinforces the role of cadres as communication bridges, as also noted by (Putri et al., 2024). However, limited capacity of cadres in technical knowledge of nutrition and health hinders their optimal role. Some cadres still lack training in the use of the Health Card (KMS) and digital record-keeping, (Sjaf et al., 2022) also found problems with the quality of data collected by cadres in various regions of Indonesia. In the Bone Bolango context, local cultural aspects have a significant influence. For example, some families are reluctant to follow recommendations for complementary feeding (MP-ASI) because they prefer traditional practices. This is consistent with findings from the study of (Muhamad et al., 2024) which emphasizes the strength of customary and cultural norms in health programs in Gorontalo.

A cross-sectional study in the work area of the South Bulango Community Health Center found a significant relationship between family participation in Posyandu (especially weighing and counseling activities) and a decrease in stunting cases (Kadir & Ahmad, 2021). These results reaffirm the importance of active participation of cadres in encouraging the involvement of mothers of toddlers. In the experience of South Suwawa District (Bone Bolango), mentoring families at high risk of stunting involves adolescent cadres and prospective brides as targets to form a pattern of pre-pregnancy preventive interventions at the community level (Jusuf et al., 2023). This approach adds an innovative dimension to the cadres in Bone Bolango. Research from IJCCD (2024) emphasized that cadres carry out routine programs such as supplementation, monitoring, and providing additional nutrition which has an impact on reducing stunting rates (Muslimin & Mursyidah, 2024). This provides empirical evidence that the integration of cadre operations can create measurable outcomes.

From a community participation perspective, it was found that families with higher education tended to be more receptive to nutritional information from cadres. Conversely, families with lower levels of education required a more intensive approach. This condition was also explained by (Millati et al., 2025) which shows a significant relationship between parental education and the success of stunting prevention programs. Posyandu cadres in Bone Bolango also play a crucial role in overseeing the distribution of supplementary food (PMT)

for malnourished toddlers. However, distribution effectiveness is often hampered by limited funding and a lack of appealing menu variety. This finding aligns with research findings of (Hastina et al., n.d.) which confirms that the success of the Supplementary Feeding (PMT) program is greatly influenced by the availability of budget support and innovation in menu development. Interviews revealed that some cadres experienced difficulties in providing stunting-related education due to limited practical and simple educational materials. They needed easy-to-understand modules to support outreach activities. A similar situation was found by (Sumandiyar et al., 2025), where cadres stated the need for contextual extension materials. In addition to serving as nutrition counselors, cadres also serve as agents of social change in the community. Some cadres have taken the initiative to form discussion groups for mothers of toddlers to share experiences on child feeding practices. This practice aligns with findings of (Maryuni et al., 2024) which shows that small group forums are effective in increasing public nutritional awareness.

In the context of policy implementation, Posyandu cadres directly implement the stunting convergence program in villages. They are tasked with registering families at risk of stunting, facilitating home visits, and reporting the results to the Community Health Center (Puskesmas), (Ikram et al., 2025) also found that the success of convergence was largely determined by the activeness of cadres in the field. Another challenge that emerged was the low attendance of fathers in Posyandu activities. Most activities were attended only by mothers of toddlers, despite the crucial role of fathers in supporting parenting and feeding practices. This is consistent with the findings of (Oktalia et al., 2024) which underscores the minimal involvement of men in child health programs. The findings of this study also indicate that long-serving cadres are more highly valued by the community than newer cadres. Trust is a key factor in effective health communication. This aligns with studies of (Dewi & Anisa, 2017) which emphasizes that the experience of cadres increases credibility in the eyes of the public. Digital technology support is still very limited in Bone Bolango. Most cadres still record data manually, slowing down the reporting process to the Community Health Center. A recent study by (Anggraini et al., 2023) also emphasized that digitalization of Posyandu records is still a major challenge in rural areas.

In terms of program sustainability, this study found that cadres require regular training to improve their capacity. Without training, many cadres find it difficult to keep up with the latest policies related to stunting. This is consistent with the findings of the (Laila et al., 2025) which recommends increasing the capacity of cadres through regular training.

Other findings indicate that cadres also act as facilitators of mutual cooperation activities in establishing village nutrition gardens. These gardens are used to provide vegetables and fruits, which are then distributed to families at risk of stunting. This practice aligns with research of (Giannetti et al., 2018) which suggests the use of local resources as a program sustainability strategy. However, not all cadres have the same capacity. There are striking differences between active and highly motivated cadres and passive cadres. This difference impacts the success of the program in each village. Research (Salim & Muslimin, 2023) also found variations in cadre performance as one of the factors causing uneven achievement of the stunting program. The support factor from the cadres' families also influences the consistency of their roles. Some cadres reported receiving full support from their husbands and children, while others faced rejection due to perceived neglect of

household chores. This finding is similar to the study (Setyorini et al., 2023) which shows that family support is closely related to the continuity of cadre service.

In terms of coordination, this study found that communication between Posyandu cadres and village midwives was still suboptimal. Several cadres complained about a lack of feedback from midwives on their monthly reports. This condition was also identified by (Syarien & Samarah, 2023), which states that weak coordination across actors often reduces program effectiveness. While the role of cadres is crucial, their legitimacy in the eyes of the community is limited. Some families still place more trust in religious figures or traditional elders than cadres. Therefore, the involvement of community leaders in supporting cadres is key to success, (Kholis et al., 2024) also emphasized the strategic role of traditional leaders in health programs in Gorontalo. Overall, the research results at this stage indicate that Posyandu cadres have a multifaceted role: as educators, motivators, social agents, and liaisons with health workers. However, the effectiveness of this role is greatly influenced by structural support factors, cadre capacity, and the local cultural context. This confirms the conclusion of (Meher et al., 2023) that stunting prevention cannot be separated from the social context and local communities.

Beyond their contribution to SDG 3 (Good Health and Well-being), the role of Posyandu cadres is also closely aligned with the innovation dimension of sustainable development. Innovation in this context does not merely refer to advanced technology but also encompasses community-based social innovation, adaptive service delivery, and collaborative governance. Posyandu cadres contribute to innovation by developing locally appropriate health education strategies, adapting communication methods to local cultural contexts, utilizing community participation to improve maternal and child health services, and facilitating early detection through systematic growth monitoring. Furthermore, the integration of digital recording systems, community-based nutrition education, family mentoring, and cross-sector collaboration between health centers, village governments, and community organizations demonstrates how cadres become drivers of grassroots innovation. These innovations strengthen the effectiveness, accessibility, and sustainability of stunting prevention programs while supporting broader Sustainable Development Goals through resilient community health systems.

The findings are presented according to the research questions, allowing a coherent explanation of the strategic roles of Posyandu cadres, the challenges encountered during program implementation, and opportunities for strengthening innovation and sustainability in community-based stunting prevention. This study highlights that the sustainability of stunting prevention depends not only on the commitment of Posyandu cadres but also on the active role of healthcare providers in supporting community-based innovation. Healthcare professionals can enhance innovation by providing continuous mentoring, strengthening digital health reporting systems, developing culturally appropriate nutrition education, and promoting collaboration across health and community sectors. These strategies improve service quality, increase community participation, and ensure that local health interventions remain adaptive and sustainable. Consequently, the partnership between Posyandu cadres and healthcare providers represents an innovative model of primary healthcare that can

strengthen long-term community health outcomes and support the achievement of the Sustainable Development Goals.

Conclusion and Recommendation

Based on the research results, it can be concluded that Posyandu cadres in Bone Bolango Regency play a strategic role in stunting prevention, particularly through nutrition education for pregnant and breastfeeding mothers, routine monitoring of toddler growth, and the provision of nutritious supplementary food based on local ingredients. This role is strengthened by cross-sector collaboration between Posyandu cadres, health workers, village governments, and community organizations such as the Family Welfare Movement (PKK). However, the effective implementation of stunting prevention programs still faces several challenges. These include limited cadre competency in technical aspects such as interpreting growth charts and developing balanced nutritional menus, as well as a lack of supporting infrastructure, such as standardized measuring instruments. Support from local governments, particularly through Village Funds and cross-sectoral policies, is crucial in ensuring the program's sustainability and success. The contribution of Posyandu cadres extends beyond routine health services. They act as community innovation agents by developing adaptive, participatory, and locally driven approaches to stunting prevention. Strengthening cadre capacity through continuous training, digital health tools, and cross-sector collaboration will not only accelerate progress toward SDG 3 (Good Health and Well-being) but also contribute to SDG 9 by fostering innovation in community-based primary healthcare systems and sustainable public service delivery. With targeted interventions and ongoing support, Bone Bolango Regency has a significant opportunity to accelerate the achievement of the stunting-free target as stated in the national program to accelerate stunting reduction.

More structured and sustainable interventions are needed to improve the capabilities and effectiveness of Posyandu (Integrated Health Post) cadres. This can be achieved through the development of practical training modules, such as the "Gizi Center," the provision of local incentives based on cadre performance, and strengthening cross-sector collaboration between community health centers (Puskesmas), village governments, and community elements. Furthermore, it is crucial to expand the role of cadres in the 1,000-HPK (1,000-HPK) cycle, including the pre-pregnancy phase through education for adolescents and prospective brides, to make stunting prevention efforts more comprehensive and sustainable.

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